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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *OK*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *OK*

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## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature	<i>[Signature]</i>	AUSTRIA	7	12	1

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## TITLE

Flat flex cable

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